PLEASE PRINT

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

I. Name of Lobbyist(s) Kayla	FEB 0 8 2018				
II. Name of lobbyist's partnersl	NEW HAMPS				
ii. Name of loodyist a partnersi	np, m m vi	corporation, ir a	illy.		
Planned Parenthood NH Ad					
(Name of partner	ship, firm or	corporation)			
18 Low Ave		Concord	NH	03301	
Business Address: (Street)		(Town/City)	(State)	(Zip Code)	
(603 674-8372	()	e-mail kayla me	ontgomery@ppnne.org	
(Telephone)	`	(Fax	x)	onigomory coppositions.	
III. This statement covers: (Cho	ose one – fi	ile cenorote veno	rts for each client OP you	may file a senarate renort for	
reportable expense transactions				may me a separate report to	
All reportable transactions oc	curring in th	e months prior to	the reporting date relative to	the following client:	
Planned Parentho	od NH Acti	on Fund			
			obbyist Registration Form)		
<u>OR</u>					
☐ All reportable transactions by unrelated to any particular client.	the lobbyist	(including the lo	bbyist's family), or the lobby	ing firm listed below which are	
	2017 🛘		July 26, 2017 🛚		
Reports cover: activity from date	of registrati	on to 3/31/17	activity from 4/1/17 to 6/30/		
	October 25, 2017 activity from 7/1/17 to 9/30/17		January 31, 2018 ⊠ activity from 10/1/17 to 12/31/17		
V. There have been no fees r If this box is checked, complete ju Concord, NH 03301.					
VI. Check if additional reports	are attache	d:			
If you have received fees or r	nade expend	litures, you must	file Addendum A– Fees and	Expenses	
☐ If you have paid an honorariu Expense Reimbursement	ım or reimbi	ursed expenses, y	ou must file Addendum B-	Report of Honorariums or	
☐ If you, your firm, or your fam	nily has mad	e political contrib	outions, you must file Adden	dum C- Political Contributions	
Sworn Statement/Affirmation b	y Lobbyist	1004 ((4) 1		- Cinin-Gtii	
I have read RSA 15, RSA 15-B, I and complete to the best of my kr			neredy swear or affirm that th	te toregoing information is true	
Illu M Ma	tylen		2/6/18		
(Signature of lobbyist)	700		(I	Date)	
Kayla M. Montgomery (Print Name of lobbyist)					

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

Planned Parenthood NH A				
(Name of partnership,	firm or corporation)			
III. Name of Client Sar	me as above	Da	te2	/6/18
to lobbying, including fees for servi	received from the client identified above ces such as public advocacy, governmen slation, and related legal work. The gr	t relation	is, or publi	ic relations services
a) Total of all fees received in this r	eporting period	a) \$ _	418.00	(prorate salary/h
b) Total of all fees received this cal (This should equal the total of all		4,45	60.00	
c) Total of all fees received to date (Add lines a and b)		c) \$ _	4,86	8.00
d) Indicate the amount of any such yet been paid	fees that are due, but have not	d) \$ _	0	<u> </u>
fees. Separate reports are to be file the lobbyist(s)/firm that are unrelat Expenses are to be reported in one during the reporting period for sala individual expenses where the expe lunch where the cost was \$25.00 or being lobbied, purchase of a ceremo (c) an itemized statement of each inc any purpose not covered by (a) (for ceremonial object to be given to the restaurant expenses for a legislative	firms, or corporations are required to red for expenditures made relative to each sed to any one client a separate report of three categories of expenses: (a) thries, benefits, support staff, and office enditure was of \$25.00 or less (for exampless, purchase of a pen with a value of levial object given to a person being lobbi lividual expenditure made during this report example: purchase of a meal with value subject of lobbying with a value great e reception). Expenses for honorariums arate addendums and should not be reported.	client and may be a aggregate expenses; ale: meal ass than a corting per ue of green than as, expense	dif expendiled for the state total of the age is purchase \$10 that is a value of strind of green eater than \$25, but note reimbursts.	ditures are made by he lobbyist(s)/firm. If all expenses paid agregate total of all d during a business given to the person \$25.00 or less); and ater than \$25.00 for \$25, purchase of a but greater than \$50, sement, or political
	reporting period for salaries, benefits, lated directly or indirectly to lobbying.	a) \$ _	0	
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.			0	
in a), of \$25 or less.		b) \$ _	••	

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist) Kayla M. Montgomery	2/6/18 (Date)
(Print Name of lobbyist)	